

DIRECT DEPOSIT *and*



On Time – Every Time!

- ***Get paid faster!***
- ***Best option for Casuals!***
- ***Eliminates lost or stolen checks!***
- ***Now enroll in ETA without a checking or savings account!***

CASUALS NOW HAVE THREE WAYS TO RECEIVE THEIR PAYMENT; DIRECT DEPOSIT, ELECTRONIC TRANSFER ACCOUNT (ETA) OR BY CHECK IN THE MAIL.

Hiring Units:

- Provide Casual an SF-1199A Direct Deposit Sign-up Form (available at www.fms.treas.gov/eft or in your Personnel Office) completed as follows:
 - o Section 1 – Block C – Enter Casuals SSN
 - o Section 1 – Block F – Check “Other” and enter “Casual Hire”
 - o Section 1 – Block G – Leave blank
 - o Section 2 – Enter: Casual Pay Center 101B Sun Ave, NE, Albuquerque, NM 87109
 - o Hiring units should NOT retain Direct Deposit information in their files.

Casual:

- Complete Section 1 and take the form to your financial institution for completion and mailing direct to the Casual Pay Center address listed in Section 2.
- This is the safest method of payment for casuals who have a checking, savings, or ETA account.

Casual Pay Center:

- Enters Direct Deposit Information into the EFF/Vendor Pay System.
- Retains original SF-1199A Direct Deposit Sign-up Form.
- Mails the Wage and Earnings Statement to the Casual.

SIGN UP FOR AN ETA ACCOUNT

Enroll in ETA without a checking or savings account. Open an ETA account at a federally insured bank, savings and loan, or credit union that are ETA providers. Submit your ETA account information to enroll with Direct Deposit and start receiving your payments automatically. For additional information contact your local bank, call 1-888-382-3311 or visit the ETA Web site at www.eta-find.gov.

HARD COPY CHECKS

Casuals who do not elect Direct Deposit will receive a hard copy check mailed to the address they provided. No additional forms are necessary.

DIRECT DEPOSIT

y



¡El Tiempo - Cada vez!

- ***¡Consiga más rápido pagado!***
- ***¡La mejor opción para Casuales!***
- ***¡Elimina cheques perdidos o robados!***
- ***¡Ahora aliste en ETA sin una comprobación o una cuenta de ahorros!***

CASUALS AHORA TIENEN TRES MANERAS DE RECIBIR SU PAGO; DEPÓSITO DIRECTO, CUENTA DE TRANSFERENCIA ELECTRÓNICA (ETA) O LLEGUE EL CORREO.

Unidades Que emplean:

- Proporcione el Casual el Depósito Directo forma, el SF-1199A (disponible en www.fms.treas.gov/eft o en su Oficina del Personal) llenada el formulario como sigue:
 - Sección 1 - Bloque C - Pone el SSN de Casual
 - Sección 1 - Bloque F - Compruebe el "Other" y incorpore "Casual Hire"
 - Sección 1 - Bloque G - Deje la sección en blanco
 - Sección 2 – Pone: Casual Pay, 101 B Sun Ave, NE, Albuquerque, NM 87109
 - Unidades que emplean NO debe conservar la información Depósito Directo en sus archivos.

Casual:

- Termine la sección 1 y lleve la forma a su institución financiera para la terminación y enviar directo a el Casual Pay Center dirección enumerada en la sección 2.
- Éste es el método más seguro de pago para los casuales que tienen una comprobación, ahorros, o cuenta de ETA.

Centro De la Paga del EFF:

- Incorpora la información directa del depósito en el sistema de la paga de EFF/Vendor.
- Conserva la forma Depósito Directo original, la SF-1199A.
- Envía el salario y la declaración de las ganancias al Casual.

ALISTE EN ETA

Aliste en ETA sin una comprobación o un cuenta de ahorros. Abra una cuenta de ETA en federal aseguró el banco, los ahorros y el préstamo, o la unión de crédito que son abastecedores de ETA. Someta su información de la cuenta de ETA para alistar con el Depósito Directo y para comenzar a recibir sus pagos automáticamente. Para la información adicional entre en contacto con su banco local, llamada 1-888-382-3311 o visite el sitio del Web de ETA en www.eta-find.gov

CHEQUES DE COPY DURO

Casuales que no elige el Depósito Directo recibirá un cheque de copia dura enviado a la dirección que proporcionaron. No hay formas adicionales necesarias.

The following brochure is available in printed form from the Casual Pay Center. E-mail us at

asc_ipc@fs.fed.us if you would like us to send you some brochures.

Quick Cash! Easy Enrollment!

ETA

Electronic Transfer Account



- ✓ Don't wait to receive your check in the mail, enroll in ETA and have your funds electronically deposited.
- ✓ The Department of Treasury designed ETA for federal payment recipients.
- ✓ ETA eliminates lost checks, and check fraud.
- ✓ ETA users enjoy the safety, security and convenience of electronic payments.
- ✓ You can enroll in ETA without a checking or savings account.
- ✓ Open your ETA account at federally insured banks, savings and loan, or credit unions that are ETA providers.
- ✓ Most ETA providers allow you to withdraw money through ATMs.
- ✓ ETA will cost users no more than \$3.00 a month (some Providers charge less).
- ✓ Submit your ETA account information to enroll with Direct Deposit and start receiving your payments automatically.
- ✓ Call 1-888-382-3311 to learn where you can open an ETA. Or visit the ETA Web site at: www.eta-find.gov



Efectivo Rápido Inscripción Fácil

ETA

Electronic Transfer Account



- ✓ No espere recibir su cheque en el correo, alista en ETA y tiene sus fondos depositados electrónicamente.
- ✓ El departamento del Hacienda diseñó ETA para los recipientes federales del pago.
- ✓ ETA elimina cheques perdidos, y fraude del cheque.
- ✓ Los usuarios de ETA gozan de la seguridad y de la conveniencia de pagos electrónicos.
- ✓ Usted puede alistar en ETA sin una cuenta comprobación o un cuenta de ahorros.
- ✓ Usted puede abrir su cuenta de ETA en federal aseguró el banco, los ahorros y el préstamo, o la union de crédito que son abastecedores de ETA.
- ✓ La mayoría de los abastecedores de ETA permiten que usted retire el dinero con ATM's.
- ✓ ETA costará a usuarios no más de \$3.00 un mes (algunos abastecedores cargan menos)
- ✓ Someta su información de la cuenta de ETA para alistar con el depósito directo y para comenzar a recibir sus pagos automáticamente.
- ✓ Para más información sobre la cuenta ETA, llame at 1-888-382-3311 (sin cargo) o visite la página del Internet en www.eta-find.gov





SIGN-UP FORM

OMB NO. 1510-0007

DIRECTIONS

- To sign up for direct deposit, the payee is to read the back of this form and fill in the information requested in Sections 1 and 2. Then take or mail this form to the financial institution. The final institution will verify the information in Sections 1 and 2, and will complete Section 3. The completed form will be return to the Government agency identified below.
- A separate form must be completed for each type of payment to be sent by Direct Deposit.
- The claim number and type of payment are printed on Government checks. (See the sample check on the back of this form.) This information is also stated on beneficiary/annuitant award letters and other documents from the Government agency.
- Payees must keep the Government agency informed of any address changes in order to receive important information about benefits and to remain qualified for payments.

SECTION 1 (TO BE COMPLETED BY PAYEE)

A NAME OF PAYEE (<i>last, first, middle initial</i>)			D TYPE OF DEPOSITOR ACCOUNT <input type="checkbox"/> CHECKING <input type="checkbox"/> SAVINGS	
ADDRESS (<i>street, route, P.O. Box, APO/FPO</i>)			E DEPOSITOR ACCOUNT NUMBER	
CITY	STATE	ZIP CODE	F TYPE OF PAYMENT (<i>Check only one</i>)	
TELEPHONE NUMBER AREA CODE			<input type="checkbox"/> Social Security <input type="checkbox"/> Fed Salary/Mil. Civilian Pay	
B NAME OF PERSON(S) ENTITLED TO PAYMENT			<input type="checkbox"/> Supplemental Security Income <input type="checkbox"/> Mil. Active	
			<input type="checkbox"/> Railroad Retirement <input type="checkbox"/> Mil. Retire.	
			<input type="checkbox"/> Civil Service Retirement (OPM) <input type="checkbox"/> Mil. Survivor	
			<input type="checkbox"/> VA Compensation or Pension <input checked="" type="checkbox"/> Other Casual Hire	
C CLAIM OR PAYROLL ID NUMBER			G THIS BOX FOR ALLOTMENT OF PAYMENT ONLY (<i>if applicable</i>)	
Prefix Suffix			TYPE AMOUNT	
PAYEE/JOINT PAYEE CERTIFICATION I certify that I am entitled to the payment identified above, and that I have read and understood the back of this form. In signing this form I authorize my payment to be sent to the financial institution named below to be deposited to the designated account.			JOINT ACCOUNT HOLDERS' CERTIFICATION (<i>optional</i>) I certify that I have read and understood the back of this form, including the SPECIAL NOTICE TO JOINT ACCOUNT HOLDERS.	
SIGNATURE		DATE	SIGNATURE	
SIGNATURE		DATE	SIGNATURE	
			DATE	

SECTION 2 (TO BE COMPLETED BY PAYEE OR FINANCIAL INSTITUTION)

GOVERNMENT AGENCY NAME USDA Forest Service, ASC Incident Finance – Casual Pay	GOVERNMENT AGENCY ADDRESS 101 B Sun Ave, NE Albuquerque, NM 87109
---	---

SECTION 3 (TO BE COMPLETED BY FINANCIAL INSTITUTION)

NAME AND ADDRESS OF FINANCIAL INSTITUTION		ROUTING NUMBER		CHECK DIGIT
FINANCIAL INSTITUTION CERTIFICATION				
I confirm the identity of the above-named payee(s) and the account number and title. As representative of the above-named financial institution, I certify that the financial institution agrees to receive and deposit the payment identified above in accordance with 31 CFR Parts 240,209, and 210.				
PRINT OR TYPE REPRESENTATIVE'S NAME	SIGNATURE OF REPRESENTATIVE	TELEPHONE NUMBER	DATE	

Financial institutions should refer to the GREEN BOOK for further instructions

THE FINANCIAL INSTITUTION SHOULD MAIL THE COMPLETED FORM TO THE GOVERNMENT AGENCY IDENTIFIED ABOVE.

NSN 7540-01-058-0224

1199-207

BURDEN ESTIMATE STATEMENT

The estimated average burden associated with this collection of information is 10 minutes per respondent or record-keeper, depending on individual circumstances. Comments concerning the accuracy of this burden estimate and suggestions for reducing this burden should be directed to the Financial Management Service, Facilities Management Division, Property & Supply Section, Room B-101, 3700 East-West Highway, Hyattsville, MD 20782 or the Office of Management and Budget, Paperwork Reduction Project (1510-0007), Washington, D.C. 20503.

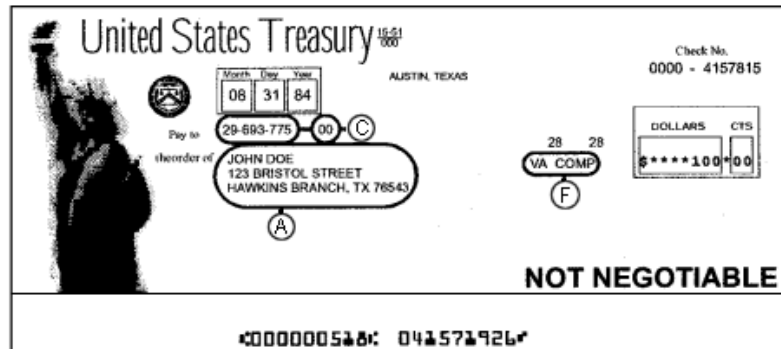
PLEASE READ THIS CAREFULLY

All information on this form, including the individual claim number, is required under 31 USC 3322, 31 CFR 209 and/or 210. The information is confidential and is needed to prove entitlement to payments. The information will be used to process payment data from the Federal agency to the financial institution and/or its agent. Failure to provide the requested information may affect the processing of this form and may delay or prevent the receipt of payments through the Direct Deposit/Electronic Funds Transfer Program.

INFORMATION FOUND ON CHECKS

Most of the information needed to complete boxes A, C, and F in Section 1 is printed on your government check:

- (A) Be sure that the payee's name is written exactly as it appears on the check. Be sure current address is shown.
- (C) Claim numbers and suffixes are printed here on checks beneath the date for the type of payment shown here. Check the Green Book for the location of prefixes and suffixes for other types of payments.
- (F) Type of payment is printed to the left of the amount.



SPECIAL NOTE TO JOINT ACCOUNT HOLDERS

Joint account holders should immediately advise both the Government agency and the financial institution of the death of a beneficiary. Funds deposited after the date of death or ineligibility, except for salary payments, are to be returned to the Government agency. The Government agency will then make a determination regarding survivor rights, calculate survivor benefit payments, if any, and begin payments.

CANCELLATION

The agreement represented by this authorization remains in effect until cancelled by the recipient by notice to the Federal agency or by the death or legal incapacity of the recipient. Upon cancellation by the recipient, the recipient should notify the receiving financial institution that he/she is doing so.

The agreement represented by this authorization may be cancelled by the financial institution by providing the recipient a written notice 30 days in advance of the cancellation date. The recipient must immediately advise the Federal agency if the authorization is cancelled by the financial institution. The financial institution cannot cancel the authorization by advice to the Government agency.

CHANGING RECEIVING FINANCIAL INSTITUTIONS

The payee's Direct Deposit will continue to be received by the selected financial institution until the Government agency is notified by the payee that the payee wishes to change the financial institution receiving the Direct Deposit. To effect this change, the payee will complete the new SF 119A at the newly selected financial institution. It is recommended that the payee maintain accounts at both financial institutions until the transition is complete; i.e., after the new financial institution receives the payee's Direct Deposit payment.

FALSE STATEMENTS OR FRAUDULENT CLAIMS

Federal law provides a fine of not more than \$10,000 or imprisonment for not more than five (5) years or both for presenting a false statement or making a fraudulent claim.